

**Maryland Board of Pharmacy  
Public Meeting Minutes  
February 17, 2010**

Name	Title	Today's Attendance		Year-to-Date Attendance	
		Present	Absent	Present	Absent
Anderson, C.	Commissioner	X		7	1
Bradley-Baker, L.	Commissioner	X		8	0
Chason, D.	Commissioner	X		8	0
Finke, H.	Commissioner	X		7	1
Handelman, M.	Commissioner	X		7	1
Israbian-Jamgochian, L.	Commissioner	X		8	0
Leandre, A.	Commissioner	X		7	1
Matens, R.	Commissioner	X		6	2
Souranis, M.	Commissioner/Treasurer		X	6	2
Taylor, D.	Commissioner/President	X		8	0
Taylor, R.	Commissioner/Secretary	X		7	1
Zimmer, R.	Commissioner	X		7	1
Bethman, L.	Board Counsel	X		8	0
Gibbs, F.	Board Counsel	X		8	0
Banks, T.	MIS Manager	X		5	3
Gaither, P.	Administration and Public Support Manager	X		8	0
Goodman, S.	Licensing Manager	X		5	3
Jeffers, A.	Legislation/Regulations Manager	X		8	0
Naesea, L.	Executive Director	X		8	0
Waddell, L.	Executive Secretary	X		8	0
Subject	Responsible Party	Discussion		Motion	Action/Results
I. Call to Order & Approval of Minutes	Donald Taylor, Board President	A. D. Taylor brought the February Public Board Meeting to order at 9:00 a.m.			
		B. D. Taylor requested that any members of the Board with a conflict of interest to any item on the agenda notify the Board at this time or when the item is addressed in the agenda.			
		C. D. Taylor requested all meeting attendees to introduce themselves and to remember to sign the guest list before they leave the meeting.			
		D. D. Taylor reported that guests will be given packets of materials so that they can follow meeting discussions. He requested that the guests please return the draft packets when they leave the meeting.			
		E. Revisions to Minutes: Approval of January 20, 2010		E. Motion:	E. Board Action:
		1. Page 2, Section II, Item C, Discussion C. Change "c in the committee to C".		D. Chason made a motion to approve	The Board voted to

		<p>2. Page 6, Section V, Item 7c, Motion Section. Delete “written” and Add “amended”.</p> <p>3. Page 10, Section XIII, Item e, Discussion Section. Delete “practitioners” and Add “all health practitioners”.</p>	<p>the minutes as amended. L. Israbian-Jamgochian seconded the motion. shed</p>	<p>approve the motion.</p>
II. Meetings Updates	Donald Taylor Board President			
III. Executive Director	LaVerne Naesea, Executive Director	<p>L. Naesea reported on the following Staffing Updates:</p> <p>A. Acknowledged and thanked A. Jeffers for working hard over the last month dealing with illnesses, death and snow storms.</p> <p>B. Announced that Ralph Quarles, first African American Pharmacist to serve on the Board of Pharmacy died in January 2010. His last term on the Board ended in 1995.</p>		
IV. PEAC Report	Anthony Tommasello, PEAC	<p>A. Tommasello reported on the PEAC monthly statistics for the Board. See Attachment 1, Section D.</p>		
V. Législation and Régulations	Anna Jeffers, Legislation and Regulation Manager Report	<p>A. A. Jeffers reported on the following Maryland Regulations - Status:</p> <p>1. <u>COMAR 10.34.03 Inpatient Institutional Pharmacy.</u> Workgroup established pursuant to the RR&amp;E</p>		
		<p>2. <u>COMAR 10.34.05 Pharmacy Security; COMAR 10.34.07 Pharmacy Equipment; COMAR 10.34.12 Removal of Expired Prescription Drugs; COMAR 10.34.13 Reinstatement of Expired Licenses For Pharmacists; and COMAR 10.34.15 Licensure By Reciprocity</u> - combined in one proposal. Published 01/29/10. <u>30 day comment period follows.</u></p> <p><b>Md R COMAR 10.34.05,07,12,13,15 012910</b></p>		
		<p>3. <u>COMAR 10.34.18 Continuing Education for Pharmacists.</u> Published 01/15/10. <u>30 day comment period follows.</u></p>		
		<p>4. <u>COMAR 10.34.20 Format of Prescription Transmission.</u> <u>To be submitted to the Department for approval and publication.</u></p>		
		<p>5. <u>COMAR 10.34.23 Pharmaceutical Services to Residents in Long-Term Care Facilities.</u> <u>To be submitted to the Department for approval and publication.</u></p>		
		<p>6. COMAR 10.34.25 Delivery of Prescriptions. Released for informal</p>	<p>6A. Motion:</p>	<p>6A. Board</p>

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	<p>comment 12/1/09 through 12/22/09. Approval of Board responses to informal comments requested for the following:</p> <p><b><u>A. JH Hlth Care Group - Informal Comment 10.34.25 – Gavqani</u></b></p> <p><b><u>Board Response to Informal Cmmt – 10.34.25 – Gavqani</u></b></p> <p>Board response edited as follows:</p> <p>Her comment concerning the application of USP guidelines prompted the Board to make revisions to the proposed COMAR 10.34.25.04A(4)(c) to include reference to manufacturers recommended storage conditions.</p> <p>The words “as established by the manufacturer in compliance with USP standards” will be added in the third line, after “humidity standards.” The section will now read:</p> <p>“Include a temperature sensing device which assures that medications and devices are maintained within appropriate temperature, standards <u>as established by the manufacturer in compliance with</u> United States Pharmacopeia (USP), during storage and shipment, and as necessary in accordance with the pharmacist’s professional judgment.”</p> <p>The same change will be made throughout the Board Responses</p>	<p>R. Zimmer made a motion to approve the letter as amended.</p> <p>L. Israbian-Jamgochian seconded the motion.</p>	<p>Action:</p> <p>The Board voted to approve the motion.</p>
	<p><b><u>B. NACDS - Informal Comments - 10.34.25</u></b></p> <p><b><u>Board Response to Informal Cmmt – 10.34.25 – NACDS</u></b></p> <p>Board response edited as follows:</p> <p><b>Location of Sensor</b></p> <p>The proposed regulations indicate that the temperature sensing device should be “packaged to include a temperature sensing device.” The temperature sensing devise would be inside the package.. The Board would like to meet the guidelines of temperature, humidity &amp; light, however; there is only a mechanism to meet guidelines for temperature.</p> <p>The same change will be made throughout the Board Responses</p>	<p>6B. Motion:</p> <p>C. Anderson made a motion to approve the letter as amended.</p> <p>D. Chason seconded the motion.</p>	<p>6B. Board Action:</p> <p>The Board voted to approve the motion.</p>
	<p><b><u>C. Kaiser Permanente - informal comments COMAR 10.34.25</u></b></p> <p><b><u>Board Response to Informal Cmmt – 10.34.25 - KP</u></b></p>	<p>6C. Motion:</p> <p>D. Chason made a motion to approve the letter as</p>	<p>6C. Board Action:</p> <p>The Board</p>

	<p>Board response edited as follows:</p> <p><b>10.34.25.04B(3)(b)</b> Kaiser Permanente proposed that this section be changed to read, “request authorization to receive the prescription from a <b>participating plan</b> pharmacy of the patient’s choice.” The Board does not regulate insurance payment issues and will not be making this change.</p> <p>In Kaiser’s plan - patients can only go to contract pharmacies. They contract with Safeway, chains, etc. CVS is not in the network.</p> <p>We strongly propose that 10.34.25.04 (B) (3) (b) be changed to read, “<i>request authorization to receive the prescription from a <b>participating plan</b> pharmacy of the patient’s choice.</i>”</p> <p>This will not unduly restrict the patient because there are enough pharmacies they can go to.</p> <p>The Board does not address insurance issues.</p>	<p><b>amended.</b></p> <p><b>R. Zimmer seconded the motion.</b></p>	<p><b>voted to approve the motion.</b></p>
	<p><b><u>D. Icore Healthcare - Informal Comment - 10.34.25</u></b></p> <p><b>Board Response to Informal Cmmt – 10.34.25 – Icore Healthcare</b></p> <p>Make revisions consistent with other Board Responses</p>	<p><b>6D. Motion:</b> <b>C. Anderson made a motion to approve the letter as amended</b></p> <p><b>M. Handelman seconded the motion.</b></p>	<p><b>6D. Board Action:</b> <b>The Board voted to approve the motion.</b></p>
	<p><b><u>E. Fred Metschulat, UMMC - Informal Comment – 10.34.25</u></b></p> <p><b>Board Response to Informal Cmmt – 10.34.25 - Metschulat</b></p> <p>Board response edited as follows:</p> <p><b>5. Turnaround time.</b> It is usually the case that pharmacies refill prescriptions before the patient is completely out of the prior fill. This is true for retail or mail order. If the temperature sensing device indicates that a replacement prescription is warranted, the patient and the pharmacy would have enough time to provide a replacement supply.without an interruption of therapy.</p> <p>Make revisions consistent with other Board Responses</p>	<p><b>6E. Motion:</b> <b>R. Zimmer made a motion to approve the letter as amended.</b></p> <p><b>D.Chason seconded the motion.</b></p>	<p><b>6E. Board Action:</b> <b>The Board voted to approve the motion.</b></p>
	<p><b><u>F. Medco - Informal Comments -10.34.25</u></b></p>	<p><b>6F. Motion:</b></p>	<p><b>6F. Board</b></p>

	<p><b>Board Response to Informal Cmmt – 10.34.25 – Medco</b></p> <p>Board response edited as follows:</p> <p><b>Issue Two – Patient’s options upon Receipt</b> Medco questioned whether §10.34.25.04(B)(3) requires that the original dispensing pharmacy authorize a patient’s request to receive a prescription from another pharmacy. The chapter does not require the original dispensing pharmacy to authorize a patient’s request to receive a prescription from another pharmacy.</p> <p><b>Issue Three – Notification within 24 hours of notice of delayed delivery</b> Medco noted that under the proposed regulation, the pharmacy permit holder shall notify the patient <i>within 24 hours</i> if the regular delivery of the patient’s prescription will be interrupted or late. There are times when the interrupted or late delivery of a patient’s prescription medication is outside the control of the pharmacy and the pharmacy may not be aware of the delay. Allowing the pharmacy 24 hours after they have been notified of the delay by the carrier will enable the pharmacy to make the necessary accommodations to ensure the patient receives their medication as timely as possible.</p> <p>Within 24 hours of the pharmacy being notified that the delivery is late.</p> <p>Add change to all the Board response letters.</p>	<p>R. Zimmer made a motion to approve the letter as amended.</p> <p>C. Anderson seconded the motion.</p>	<p>Action:</p> <p>The Board voted to approve the motion.</p>
	<p><b>G. Revised responses from the January 20, 2010 Meeting</b></p> <p><b>Bd response to informal cmmts - 10.34.25 - CVS Caremark</b></p> <p><b>Bd response to Informal cmmts - 10.34.25 – Delmarva</b></p> <p><b>Bd response to informal cmmts - 10.34.25 - Express Scripts</b></p> <p><b>Bd response to Informal cmmts - 10.34.25 – Sandler</b></p> <p><b>Bd response to Informal cmmts - 10.34.25 – Surescripts</b></p> <p>Make revisions consistent with other Board Responses</p>	<p>6G. Motion: C. Anderson made a motion to approve the letters as amended.</p> <p>L. Israbian-Jamgochian seconded the motion.</p>	<p>6G. Board Action:</p> <p>The Board voted to approve the motion.</p>
	<p><b>7. 10.34.28 Automated Medication Systems.</b> Published on 12/4/09. 4 comments received:</p> <p><b>A. COMAR Comment - 10.34.28 Kaiser Permanente – Friedman</b></p>	<p>7A. Motion: R. Zimmer made a motion to return the response to the</p>	<p>7A. Board Action:</p> <p>The Board</p>

	<p><b>Board Response – Official Cmmt - 10.34.28 – KP</b></p> <p>This response was returned to the Practice Committee</p>	<p>Practice Committee.</p> <p>L. Israbian-Jamgochian seconded the motion.</p>	<p>voted to approve the motion.</p>
	<p><b>B. Comment - 10.34.28 - Omnicare – Krug</b></p> <p><b>Board Response – Official Cmmt - 10.34.28 – Omnicare</b></p> <p>Board response edited as follows:</p> <p><b><u>10.34.28.06C</u></b>  The Board has noted your concern regarding the meaning of “shall have access” in this section. You questioned whether this means that a pharmacist will be required to actually be sitting at a video monitor and visually review every dose that is removed from the machine on a routine basis. Or, does this mean that a pharmacist shall have access in order to visually inspect the operation of the machine on an as needed basis, such as when the nurse may have a question, or for quality assurance or auditing purposes.</p> <p>Please review Health Occupations Article, 12-605, Annotated Code of Maryland. “Access” means that a pharmacist shall have access in order to visually inspect the operation of the machine on an as needed basis, such as when the nurse may have a question, or for quality assurance, auditing purposes, or electronic problems. This is consistent with other uses of the word “access,”</p> <p><b><u>10.34.28.04A and .08</u></b>  In the proposed regulations you asked if Regulation .08 “Final Check of Medication for Centralized Automated Medication Systems” was purposely omitted during revision discussions or was this simply an error of omission and should be included in the proposed regulations for public comment.</p> <p>The Board intentionally omitted the section in question.</p> <p>Please be advised that other entities have provided informal comments and suggestions for revisions. The revisions to the regulations, which the Board approved at today’s public Board Meeting are as follows:</p> <p><b><u>Return of unused medication to centralized automated medication systems</u></b></p>	<p><b>7B. Motion:</b>  L. Israbian-Jamgochian made a motion to approve the letter as amended.</p> <p><b>D. Chason seconded the motion.</b></p>	<p><b>7B. Board Action:</b></p> <p>The Board voted to approve the motion.</p>

	<p>It has been noted that unfortunately, many patients do not pick up their completed prescriptions filled at retail pharmacies, for one reason or another. Some entities have requested the ability to return unused medication to <u>centralized</u> automated systems that use bar coding for positive drug identification, for cells originally filled using <u>bulk</u> containers and not just single-drug unit dose packaging.</p> <p>The proposed regulations do not address centralized returns. It is a standard of practice that medications may not be returned to a stock bottle. To clarify returns in a centralized automated medication system, the Board recommends adding 10.34.28.08C:</p> <p><u>C. Unused medications dispensed from a centralized automated medication systems stocked with bulk medications may not be returned to the system.</u></p> <p><b><u>Other suggested changes</u></b> The Board has also been alerted to the following typographical errors. These non-substantive corrections will be made in the re-proposal.</p> <p>COMAR 10.34.28.08(B.)(2): “<i>propped</i>” should be changed to “<i>proper.</i>”</p> <p>COMAR 10.34.28.11(B)(9)(b)(ii): “<i>access</i>” should be changed to “<i>accessing.</i>”</p>		
	<p><b><u>C. CareFusion Comments COMAR 10.34.28</u></b></p> <p><b><u>Board Response – Official Cmmt - 10.34.28 - CareFusion</u></b></p> <p>Board response edited as follows:</p> <p>CareFusion’s main concern is why access should be restricted for multiple medications, drug strengths or dosage forms in automated systems, when it is not restricted for multiple medications, drug strengths or dosage forms in manual medication charts, or even crash carts. CareFusion noted that any restrictions on the prompt removal of multiple medications, strengths or dosage forms can harm a patient when seconds count in an operating room or in an intensive care unit.</p> <p>It’s part of the existing regulations since September 1, 2003.</p> <p>Please be advised that other entities have provided informal comments and suggestions for revisions. The revisions to the regulations, which the Board approved at today’s public Board Meeting are as follows:</p>	<p><b>7C. Motion:</b> <b>M. Handelman</b> <b>made a motion to</b> <b>approve the letter as</b> <b>amended.</b></p> <p><b>R. Zimmer</b> <b>seconded the</b> <b>motion.</b></p>	<p><b>7C. Action Item:</b> <b>Send letter back</b> <b>to practice for</b> <b>final review.</b></p> <p><b>7C. Board</b> <b>Action:</b></p> <p><b>The Board</b> <b>voted to send</b> <b>letter back to</b> <b>Practice</b> <b>Committee for</b> <b>final review.</b></p>

	<p><b><u>Return of unused medication to centralized automated medication systems</u></b></p> <p>Someone else would also like to comment on what is proposed for COMAR 10.34.28.08. Unfortunately, many patients do not pick up their completed prescriptions filled at retail pharmacies, for one reason or another. Another company requests the ability to return unused medication to <u>centralized</u> automated systems that use bar coding for positive drug identification, for cells originally filled using <u>bulk</u> containers and not just single-drug unit dose packaging.</p> <p>The proposed regulations do not address centralized returns. It is a standard of practice that medications may not be returned to a stock bottle. To clarify returns in a centralized automated medication system, the Board recommends adding 10.34.28.08C:</p> <p><u>C. Unused medications dispensed from a centralized automated medication systems stocked with bulk medications may not be returned to the system.</u></p>		
	<p><b><u>D. Comment - 10.34.28 - S MD Hosp – McNamara</u></b></p> <p><b><u>Board Response – Official Cmmt - 10.34.28 – S Md Hosp</u></b></p> <p>Board response edited as follows:</p> <p>It was noted that in the proposed 10.34.28 regarding automated medication systems that "they shall operate in a manner which limits simultaneous access to multiple drug entities." You expressed concern with what will happen to all the Pyxis towers used in hospitals throughout Maryland and whether hospitals will now have to switch instead to "cubies." "Individual medication bins"</p> <p>The elimination of matrix drawers and the replacement with "cubies" should have occurred by September 1, 2003 years ago. Under this regulations hospitals in Md must adopt cindy will email to me</p>	<p><b>7D. Motion:</b> R. Zimmer made a motion to approve the letter as amended.</p> <p><b>L. Israbian-Jamgochian seconded the motion.</b></p>	<p><b>7D. Board Action:</b></p> <p><b>The Board voted to approve the motion.</b></p>
	<p><b><u>8. COMAR 10.34.32 Pharmacist Administration of Vaccinations. Executive Order extended to Feb. 8, 2010.</u></b></p>		
	<p><b><u>9. COMAR 10.13.01 Dispensing of Prescription Drugs by a Licensee.</u></b></p> <ul style="list-style-type: none"> <li>• Submitted to DHMH 11/20/08</li> <li>• Comments received from Physicians, Dentists, Podiatrists. JOINT Response sent 02/05/09 and ratified at 02/18/09 Bd Mtg. Met with DDC 03/26/09. Hold until mid-May for DDC to complete inspections. Anna Jeffers sent follow-up e-mail to DDC on May 26, 2009. DDC responded that they were working with appropriate Boards.</li> </ul>		

		<ul style="list-style-type: none"> <li>• Bd of Physicians response 03/09/09.</li> <li>• Bd of Pharm response 040709.</li> <li>• Bd of Physicians response 4/28/09.</li> <li>• Bd of Pharm response 07/16/09.</li> <li>• Bd of Physicians response 07/27/09.</li> <li>• Bd of Pharm response 08/12/09</li> </ul> <p>Joint Meeting was held on September 10, 2009. Update provided by LaVerne Naesea at the Sept. 16, 2009 Board Meeting.</p> <p>DHMH, Chief of Staff Kronmiller requested additional information in follow-up to September 10, 2009 meeting.</p> <p>Email sent to Wendy on November 4, 2009 indicating the Board's concerns.</p> <p>Update on Consumer Survey sent 12/14/10. Anna Jeffers spoke to Wendy Kronmiller 1/29/10 and her review of the survey will be forthcoming.</p>		
		<p>B. A. Jeffers reported on the following Maryland Legislation:</p> <p>For Ratification:</p> <p>1. HB 114 - Health Occupations Boards – Revisions – Position Paper in Support with Amendment</p> <p>The amendment strikes the word “authorized” and substitutes the word “requires” so that only the Boards currently “required” to use peer review, would be required to provide a licensee under investigation with the opportunity to review any final peer review report and the opportunity to provide a written response.</p> <p>SB 291 - Health Occupations Boards – Revisions – Position Paper in Support with Amendment</p>	<p>B1. R. Zimmer made a motion to ratify the position paper.</p> <p>D. Chason seconded the motion.</p>	<p>B1. Board Action:</p> <p>The Board voted to approve the motion.</p>
		<p>2. SB 163 - State Board of Pharmacy - Wholesale Distributors - Accreditation and Reciprocity – Position Paper in Support</p> <p><b>SB 163 Wholesale Dist - Accreditation 020510</b></p>	<p>B2. L. Israbian-Jamgochian made a motion to ratify the position paper.</p> <p>D. Chason seconded the motion.</p>	<p>B2. Board Action:</p> <p>The Board voted to approve the motion.</p>
		<p>3. SB 165 - Health Occupations – Therapy Management Contracts – Repeal of Sunset – Position Paper in Support</p>	<p>B3. L. Bradley-Baker made a motion to</p>	<p>B3. Board Action:</p>

		<b>SB 165 - DTM - Position Paper 020510</b>	ratify the position paper.  D. Chason seconded the motion.	The Board voted to approve the motion.
		<b>4. SB 370 - Pharmacies - Delivery of Controlled Dangerous Substances – Letter of Support</b>	B4. L. Israbian-Jamgochian made a motion to ratify the Letter of Support  R. Zimmer seconded the motion.	B4. Board Action:  The Board voted to approve the motion.
		<b>5. HB 411 - Statewide Advisory Commission on Immunizations - Membership, Sunset Extension, and Study of HPV Vaccine – Position Paper in Support with Amendments</b>  The Board requests that pharmacists be added to the Commission.	B5. D. Chason made a motion to ratify the position paper.  R. Zimmer seconded the motion.	B5. Board Action:  The Board voted to approve the motion.
		C. A. Jeffers reported on the following Maryland Legislation,  <b><u>For Consideration:</u></b>  <b>1. HB 431 - Medical Review Committees - Subpoenas - Medical Records for Mental Health Services</b>	C1. D. Chason made a motion to support with amendments.  R. Zimmer seconded the motion.	C2. Board Action:  The Board voted to approve the motion.
		<b>2. HB 627 - Health Occupations Boards and Committees - Consumer Member Requirements</b>	C2. C. Anderson made a motion to oppose.  D. Chason seconded the motion.	C2. Board Action:  The Board voted to approve the motion.
		<b>3. HB 648 – Environment – Drug Stewardship Program</b>	C3. R. Taylor made a motion to take No position.  D. Chason seconded the motion.	C3. Board Action:  The Board voted to approve the motion.
		<b>4. HB 649 - Environment – Pharmaceutical Disposal Act (facilities</b>	C4. C. Anderson made a motion to support the position paper with amendments.	C4. Board Action:  The Board voted to

			L. Israbian-Jamgochian seconded the motion.	approve the motion.
		<b>5. SB 579/HB 713 - Criminal Law - Drug Schedules - Marijuana</b>	C5. C. Anderson made a motion to submit a letter of concern.  L. Israbian-Jamgochian seconded the motion.	C5. Board Action:  The Board voted to approve the motion.
		<b>6. SB 662 – Prescription Drugs – CDS – Certification of Information on Delivery</b>	C6. C. Anderson made a motion to support with amendments.  L. Israbian-Jamgochian seconded the motion.	C6. Board Action:  The Board voted to approve the motion.
		<b>7. HB 712 – Public Health - Medical Marijuana</b>	C7. R. Zimmer made a motion to submit a letter of concern.  D. Chason seconded the motion.	C7. Board Action:  The Board voted to approve the motion.
		<b>8. HB 918 – Prescription Drug Monitoring Program</b>	C8. D. Chason made a motion to take No Position  L. Israbian-Jamgochian seconded the motion.	C8. Board Action:  The Board voted to take No Position.
VI. Inspection Program Report	Lenna Israbian-Jamgochian, Chair	L. Israbian-Jamgochian reported on Compliance monthly statistics for the Board. See Attachment 1, Section C.		
VII. Management Information Services	Tamarra Banks, MIS Manager	A. T. Banks reported on MIS monthly statistics for the Board. See Attachment 1, Section F.		

		<p>B. T. Banks reported on the following MIS updates:</p> <p>1. T. Banks thanked L. Naesea, L. Waddell, S. Goodman, and M. Hsu for applying the disaster recovery methods in preparation of the Board packet during the recent snow storms.</p>		
		<p>2. T. Banks reported that the in house access database system that M. Hsu is creating should be completed by March 10, 2010.</p>		
		<p>3. L. Naesea reported the Board was requested to use License 2000 system that will cost 150,000 dollars initially and 40,000 dollars yearly maintenance. If the Board adopts that system then it will not have to go out on bid. T Banks suggest that the Board use the in-house database that M. Hsu is creating while a decision is made regarding License 2000. The in-house system is anticipated to be completed March 10, 2010. The in-house database system would be used for licensing and compliance. The cash mail component would need to be added to the system. If the Board decides to go with the in-house database system it will allow the Board to come off of the mainframe.</p>		
		<p>4. L. Naesea acknowledged and thanked T. Banks for working from home during her illness to ensure that the postings were done for Board meetings. L. Naesea also acknowledged and thanked S. Goodman for revising and updating applications to be reflect the Board's fee increase.</p>		
		<p>5. T. Banks reported that she and Dave were scheduled to meet on February 9, 2010 to discuss and revise the Board Stats. Due to the winter storm, the meeting was cancelled and will be rescheduled at a later date.</p>		
		<p>6. T. Banks reported that DHMH expects to mandate Malware, anti-virus system for the agencies computer. The Board has a copy of Microsoft Office 2007 and will begin to upgrade some computers around the office. The Board has received 4 printers from DHMH which needs to be distributed.</p>		
		<p>7. L. Naesea reported that DHMH wants the Board to go out on full bid if it elects not to purchase the License 2000 system. The Board current options are License 2000, using the internally developed database, or going out on full bid. R. Taylors suggest that the Board use License 2000 because it's faster and better. R. Taylor asked if the Board could send the department a summary of what the Board's requirements are for its database and systems and find out if License 2000 can meet those needs and the cost for all required processes to be implemented.</p>		
VIII. Administration & Public Support	Patricia Gaither, Administration and	<p>A. P. Gaither reported on the Administration and Public Support monthly statistics for the Board</p>		

	Public Support Manager			
		<p>B. P. Gaither reported on the following staffing updates:</p> <ol style="list-style-type: none"> <li>1. All candidates for the Pharmacist Compliance Officer were interviewed and their references checked. All candidates but two candidates requested higher salaries than the Department of Budget and Management wants to offer. The Board has to request approval of the selected candidates salary file for an appeal.</li> <li>2. T. Banks is working with P. Gaither on the draft contract for the Help Desk position.</li> <li>3. Candidates for the Public Information Officer were interviewed and the Board has one additional candidate to interview on Monday, February 22, 2010. Most candidates were referred by the State of Maryland's lay-off list and were required to be interviewed.</li> <li>4. A freeze exempt was sent to the department for the vacant Pharmacy Inspector position.</li> <li>5. An exemption was filed for 2 temporary employees positions and the Board is still awaiting approval.</li> </ol>		
IX. Public Relations Committee Report	Lynette Bradley-Baker, Chair	A. P. Gaither reported that the Winter 2010 Newsletter has been printed and were mailed today.		
		<p>L. Bradley-Baker reported on the following Public Relations Committee Updates:</p> <ol style="list-style-type: none"> <li>1. The request for articles for the Spring 2010 Newsletter will be sent out next week.</li> <li>2. Maryland Patient Safety Conference at the Baltimore Convention Center L. Bradley will be attending the conference to represent the Board.</li> </ol>		
X. Practice Committee	Reid Zimmer, Chair	R. Zimmer reported that there were no public inquires requiring a response since the January meeting.		

XI. Licensing Committee	Michael Souranis, Chair	A. M. Souranis reported on the following Licensing Committee statistics for the Board. See Attachment 1, Section A and E.		
		<p>B. S. Goodman reported on the following:</p> <ol style="list-style-type: none"> <li>1. The establishment renewal period will begin September 2010 giving the Board more time to process applications instead of having a crunch period.</li> <li>2. The Pharmacist Licenses will be changed from two sheets to a one sheet design similar to Pharmacy Technician Registration cards. This will alleviate current printer issues.</li> <li>3. The Licensing Unit is looking into how the on-line system can accommodate renewing distributors to apply and pay on-line.</li> <li>4. The Licensing Unit is streamlining all of the applications so that filling them out is more clear and to minimize length of applications.</li> </ol>		
		<p>C. Licensing committee recommended the following Pharmacy Technician Training Program for Approval:</p> <ol style="list-style-type: none"> <li>1. Gondy Medical Institute</li> </ol>	<p>C. Motion: Licensing committee made a motion approve the Pharmacy Technician Training.</p> <p>R. Taylor seconded the motion.</p>	<p>C. Board Action: The Board voted to approve motion.</p>
		<p>D. C. Anderson reported that Pharmacy Solutions is requesting a pharmacy waiver permit to provide services for senior care homes and HIV clinics.</p>	<p>D. Licensing Committee made a motion to deny the waiver request for Pharmacy Solutions.</p> <p>R. Taylor seconded the motion.</p>	<p>D. Board Action: The Board voted to approve the motion.</p>
XII. Disciplinary Committee	Lenna Israbian-Jamgochian, Chair	L. Israbian-Jamgochian reported on Compliance Committee monthly statistics for the Board. See Attachment 1, Section A and C		

XIII. Long Term Care	Mayer Handelman, Chair	None		
XIV. Informational	Donald Taylor, Board President	<p><b>D. Taylor reported on the following information updates:</b></p> <ol style="list-style-type: none"> <li><b>1. ISMP- Need safety tools for community pharmacies</b></li> <li><b>2. HHS</b></li> <li><b>3. PMP-Advisory committee website</b></li> </ol>		
XV. Adjournment	Donald Taylor, Board President	<p>A. D. Taylor asked for a motion to close the Public Meeting and open a Closed Public Session for the purpose of engaging in medical review committee deliberations of confidential matters contained in technician applications in accordance with State Government, Sect. 10-508(a)(13).</p> <p>The Public Meeting was adjourned at <u>11:54 A.M.</u> .</p> <p>B. At <u>12:05 P. M.</u> D. Taylor convened a Closed Public Session to conduct a medical review of technician applications.</p> <p>C. The Closed Public Session was adjourned at <u>12:26 P.M.</u> Immediately thereafter, D. Taylor convened an Administrative Session for purposes of discussing confidential disciplinary cases. With the exception of cases requiring recusals, the Board members present at the Public Meeting continued to participate in the Administrative Session</p>	<p>A. Motion:</p> <p>R. Matens made a motion to close the Public Meeting and open a Closed Public Session.</p> <p>D. Chason2 seconded the motion.</p>	<p>A. Board Action:</p> <p>The Board voted to approve the motion.</p>